CITY OF LINCOLN/LANCASTER COUNTY

CONTRACT AWARD NOTIFICATION SPECIFICATION NO. 04-099 ANNUAL REQUIREMENTS FOR MEDICAL EQUIPMENT & SUPPLIES FOR HEALTH DEPARTMENT

DATE: June 24,2005

CONTRACT PERIOD: June 1, 2005 thru May 31, 2006

CONTRACTOR: Midland Medical Supply Co.

4850 Old Cheney Rd Lincoln NE 68516 PURCHASING DIVISION K-STREET COMPLEX 440 SOUTH 8TH STREET LINCOLN, NEBRASKA 68508

(402) 441-7410

Company Representative: Rocke Bratt

Telephone No.: 423-8877 **FAX No.**: 423-2931

E-Mail Address: rocke@midmed.com

THE CITY/COUNTY'S SPECIFICATIONS AND THE CONTRACTOR'S ACCEPTED PROPOSAL AND PRICING SCHEDULES, NOW ON FILE IN THE OFFICE OF THE CITY CLERK AND/OR THE COUNTY CLERK, ARE ADOPTED BY REFERENCE AND ARE AS FULLY A PART OF THIS CONTRACT FOR THE ABOVE-NAMED COMMODITY AS IF REPEATED VERBATIM HEREIN.

PER ATTACHED SPECIFICATION AND BID DATED 04/14/04 Section #3

NO ACTION NEED BE TAKEN BY THE CONTRACTOR AT THIS TIME. ORDERS FOR MATERIAL WILL BE MADE AS NEEDED BY THE VARIOUS CITY/COUNTY DEPARTMENTS.

DEPARTMENTS REQUIRING CATALOGS AND/OR PRICING SCHEDULES SHALL NOTIFY THE CONTRACTOR DIRECTLY.

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E.O. #73478 Dated: 6/21/05

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(Amended)	COMPANY	NAME: MIDEAND MEDICAL SUPPLY CO.

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	(Amended) COMPANY NAME: MIDE	LAND MEDICAL SUPPLY CO.
2.22	Cover slips, 22 X 22- per ounce 358-53/2222	\$ \$ 2.28
2.23	13 X 100 glass tubes(wet prep) per box/250 222-MI3	\$ 5 6.36
2,24	Transfer Pipettes 500 per box 535-1277503000	\$ - \$ 10.55
3.	Supplies	
3.1	Sterile cotton tip, 6" 2 per pkg 327-90/6 8×//00	\$ - \$ 3.16
3.2	Cotton Balls 2000/box 327-802 e3/2000	\$ - \$ 13.21
3.3	Adhesive flex Bandage 3/4" X 3" strips 089-Inc40/8 84/00	\$ - \$ 2.52
3.4	4" ACE Bandage 254-1640 IMC	\$.98EA \$ 9.80 PK/10
3.5	Adhesive flex spot round bandage 089-CBD 4022	\$ <u>~</u> \$ 2.91
3,6	#15 Surgical Blade 8x/100 645-2001-15	\$ <u>-</u> \$ <u>13.57</u>
3.7	Tongue Blade Sr 5 3/4" 8x/500 327-9002	\$ <u>-</u> \$ <u>3.50</u>
3.8	Digital Probe Covers 100/box 574-15-618-000	\$ \$ <u>2.65</u>
3.9	5 oz paper cups 100/sleeve 204-84/42	\$ - \$ 2.61
3.10	1 oz medicine cups 100/sleeve 926-4695	\$ - \$ · 52
3.11	Envirocide disinfectant per gallon 623-13-3300	s - s /8.37
3.12	Dressing Release 2 X 3 TELFA-TYPEPAO Bx/100 327-123	\$ <u>-</u> \$ <u>5.55</u>
3.13	Dressing Release 4 X 5 Telfa-Type PAD Bx/mo 327-134	\$ - \$ 8.30
3.14	Gloves vinyl powder-free Large # 100 per box	\$ <u> </u>
3.15	Gloves vinyl powder-free Medium # 100 per box	\$ <u>-</u> \$ <u>3.17</u>
3.16	Gloves vinyl powder-free Small # 100 per box	\$ - \$ 3.17
3.17	KY Jelly, 402 tube Bonne PS TRIAD Luse Jerry 440-10-8500	\$.82 EA \$ 9.84 cs/12
3.18	Table Paper 21 X 225, 12 rolls/case 425-018	\$ <u>\$ 29.95</u>
3.19	Alcohol Prep pad 200/box 518-5150	\$ 1.52
3.20	Scrub Alcohol foam 5.4 oz ALCARE 808-639957	\$ <u>5.28</u>
3.21	2 ply sheet drape 40 X 48 (large exam) 425-300	\$ 12.20
3.22	Towel, prof dental 3 ply white 14 X 18 425-170	\$ 12.38
3.23	Uncuff, 3.5mm Trach tube 814-510407	\$ \$ 1.65 E4
3.24	Medical Kleenex Wipe CS/48 524-21171	\$ 23.10
3.25	Iodine per gallon Volu Sol 559-VGI/28	\$ 63.98
3.26	De-colorizer per gallon VoluSoc 559-VGD/28 Safranin per gallon VoluSoc 559-VGC/28	\$ 42.06
3.27	Fee Same	\$ 43.00
3.28	Crystal Violet Stain per gallon Volu Sol 559-VGS 128	\$ <u>\$ 49.05</u>
3.29	Aloe-Gaurd Soap per gallon Active Ingredient Chlorxylene 0.50 % w/w Golo 423-4206-04 PROVON MEDICATED LOTION SOAP, GALLON CS/4	\$ \$ <u>63.60 cs/4</u>
3.30	Serracult Occult Bld TMMUNOSTICS 472-HS100 Bx/100	\$ <u>-</u> \$ 30.80
3.31	Isopropyl Alcohol per case, # bottles/case/2x/6oz/463-Dooz2	\$.62EA \$ 7.44 cs/12
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•	(Amended) COMPANY NAME: MIDL	and Medica	L SupplyC
3.32	Envirocide disinfectant per case OPTI-CIDE 24 oz TRUGER SPRAY 617-005/2-024	\$ 5.95 EA	\$ 71.40 cs
3.33	BKC towlette per case 440-105101 c5/108x/100	\$ 1.40 Bx	\$ 14.000
3.34	Regular Kleenex per case 524-21400 CS/368x/100	\$ 1.02 Bx	\$ 36.72 0
3.35	Safe-Skin small powder-free gloves per case 524-220 # box per case 10	\$ 8.908x	\$ 89.00 cs
3.36	Safe-Skin small lt powder gloves per case 524-200 # box per case /0	\$ 5.648x	\$ 56.40 4
3.37	Safe-Skin extra-small 1t powder gloves per case # box per case 10 524-100	\$ 5.64 Bx	\$ 56.400
3.38	3VRenata Batteries # CR2450N for an ACCU-CHEK DURACELL	\$	\$ 1.99
	Total for Items Bid 392-DL 24508 39. LITHIUM	\$	\$
BID SE	CURITY REQUIRED: Yes Amount: No XX	1700	
docume follow	al provisions for Commodity Term Contracts are included wint. Bidders are urged to read the Special Provisions being sections of the Proposal.	th the spe	cification leting the
Contra	ct Extension Renewal is an option: YesNo	•	
TERM E	RICE CLAUSE: BIDDER MUST STATE (a) Bid prices firm for the full contract period: (b) Bid prices subject to escalation/de-escalation: (c) If (b), state period for which prices will remain firm: Through	•	
govern bidder the sa shall Politi additi If "YE politi be met the Ci	OCAL PURCHASING: The City/County desires to make available ment entities of the State of Nebraska, by mutual agreement, and properly authorized inter-local purchasing agreements, me services, at the prices quoted, for the period of this confidered on the Bid Form in the space provided below it cal Subdivision orders in accordance with the contract term on to orders from City of Lincoln/Lancaster County. YES NO S", Contract supplier or suppliers may honor pricing and excal sub-divisions, cities and counties. Terms and conditions by political sub-divisions, cities and counties. Under no ty of Lincoln/Lancaster County be contractually obligated sees by these political sub-divisions, cities or counties.	with the sthe right to ontract. Est he/she was and conditioned the condition of the conditions are circumstant.	successful o purchase ich bidder ill honor tions, in ontract to tract must
	SERVICES: 1. Supply with bid documents your full line Medical Supp General Catalog discount offered	ly catalog.	
	2. Supply with bid a separate listing of available latex	-free produ	icts.
;	3. Toll-free telephone ordering number 800-742-2895	F	
	1. Does your company have customized internet ordering compectibe: MIDLAND MEDICAL WEBSITE - WWW.MIDMED.COM	apability?	· ·
	Deliveries shall be pre-paid, shipped same-day direction. Specify shipping method: MIDLAND MEDICAL COMPANY TR Delivery days 1-3 Pays ARO not to exceed three	wek	-
	5. Shipping address is: Lincoln/Lancaster Health Department: 3140 N Street Lincoln NE 68510		

(Amended) COMPANY NAME: MIDIAND MEDICAL Supply Co.

COMPANY REPRESENTATIVE responsible for the administration of this Agreement:

NAME: RAY SUMMERLIA
TITLE: CUSTOMER SERVICE SPECIALIST
PHONE NO. 423-8877

OR SOCIAL SECURITY NUMBER

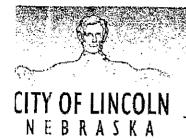
AFFIRMATIVE ACTION PROGRAM: Successful bidder will be required to comply with the provisions of the City's Affirmative Action Policy (Contract Compliance, Sec. 1.16). The Equal Opportunity Officer will determine compliance or non-compliance, upon a complete and substantial review of successful bidder's equal opportunity policies, procedures and practices.

The undersigned signatory for the bidder represents and warrants that he has full and complete authority to submit this proposal to the City, and to enter into a contract if this proposal is accepted.

RETURN 2 COMPLETE COPIES OF PROPOSAL AND SUPPORTING MATERIAL. MARK OUTSIDE OF BID ENVELOPE AS FOLLOWS: SEALED BID FOR SPEC.04-099

MIDLAND MEDICAL SUPPLY COMPANY COMPANY NAME	Ray Samuelin
P.O.Box 6037	RAY SUMMERLIN
STREET ADDRESS or P.O. BOX	(Print Name)
LINCOLN, NE 68506	CUSTOMER SERVICE SPECIALIST
CITY, STATE ZIP CODE	(Title)
423-8877 (800-742-2895)	4-13-04
TELEPHONE	(Date)
•	•
470530109	
EMPLOYER'S FEDERAL T D NO	

Bids may be inspected in the Purchasing Division offices during normal business hours, <u>after</u> tabulation by the purchasing agent. If you desire a copy of the bid tabulation to be mailed to you, you must enclose a <u>self-addressed stamped envelope</u> with your bidding documents. Bid tabulations can also be viewed on our website at: http://www.ci.lincoln.ne.us/city/finance/purch/specindx.htm



Purchasing Division / Finance Department Vince M. Mejer, Purchasing Agent 440 South 8th Street Suite 200, Southwest Wing Lincoln, Nebraska 68508

402-441-7410 fax: 402-441-6513



MAYOR COLEEN J. SENG

lincoln.ne.gov

April 4, 2005

Midland Medical Supply Co. PC) Box 6037 Lincoln NE 68506

Atn: Ray Summedin

RE: ANNUAL REQUIREMENTS FOR MEDICAL EQUIPMENT AND SUPPLIES FOR HEALTH DEPT., SPECIFICIATION 04-099

in accordance with the terms and conditions of the above referenced contract, the City of Uncoin/Lancaster County Desires to renew the contract for one (1) additional term beginning June 1, 2005 thru May 31, 2006.

It is understood that all terms of payment and other conditions of the original contract will remain unchanged during the renewal term.

As evidence of your company's desire to renew the above referenced contract under its original terms and conditions, please countersign below. Return the original lefter, on or before <u>April 20</u>, 2005 for processing of the contract renewal by the City of Lincoln/Lancaster County.

If your company should choose not to renew this contract in it's original form, please state on your letterhead the reasons and return to the City of Uncoin/Purchasing Dept. 440 So. 8th, Suite 200. Lincoln, NE 68508.

Shelia Williams
 Senior Office Assistant

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Company Name Mich land Medical Jupy
Company Name Midland Medical Supply Company Address 4850 Old Chropy Rd Linch NET
Phone No. <u>423-9877</u>
FAX No. 423-2931
E-Mail Address rocke@midmed.com
By(print) Rocke L Bratt
Title Contracts Alministrator
Date 5/4/05
Signature Jafu Bratt